STATEMENT OF DISCLOSURE OF INTERESTS STATE AND LOCAL OFFICE HOLDERS, CANDIDATES AND APPOINTEES TO SUCH POSITIONS, NON-GENERAL ASSEMBLY MEMBERS, ETC.

Please see the attached Instructions before completing this form (the failure to timely and properly submit the required disclosure statement can, under T.C.A. §3-6-205, result in the imposition of civil penalties in amounts up to \$10,000). Attach additional pages as necessary. Note that this disclosure statement must be signed and the signature attested to by a witness in item 13. In addition, please be aware that the information listed on this statement may be posted on the Commission's website pursuant to T.C.A. § 8-50-501(d)(3).

1. NAME OF OFFICIAL OR CANDIDATE	2. PHONE NUMBER			
EddiE M. NEAL 901-743-3248				
3. ADDRESS (Street or Rural Route 2405 Boyle AVE. ME	city State			
4. TITLE OF OFFICE HELD OR SOUGHT (Include municipality) STATE REPRESENTE SHELBY COUNT			ide name of	county or
5. SOURCES OF INCOME a. List major source(s) of private income of more "Major sources of private income" include, but are not limit amounts need to be stated. MASONKY CLEANING S.S.	ted to, offices, directorships	and salaried employm		
6. INVESTMENTS: List any investment by you, you other business organization in excess of ten thousand doll corporation or organization must be listed but no dollar am	lars (\$10,000) or five perce	nt (5%) of the total capi	ital. The nai	
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 LOBBYING: List any person, firm or organization for whom compensated lobbying is done by any associate, your
spouse or minor children residing with you. Also, list any firm in which you, your spouse or minor children residing with you hold
any interest for whom compensated lobbying is done. Explain the terms of any such employment, the subject matters lobbied and/or the measures to be supported or opposed.
and/or the measures to be supported or opposed.
RESIDENCE TO A STATE OF THE STA
8. PROFESSIONAL SERVICES: List in general terms (by areas of the client's interests) the entities to which profession services, such as those of an attorney, accountant or architect, are furnished by you or your spouse.
 RETAINER FEES: List any retainer fee you receive from any person, firm or organization who is in the practice of promoting or opposing, influencing or attempting to influence directly or indirectly, the passage or defeat of any legislation befor the Tennessee General Assembly, the legislative committees or the members thereof.
(5) years of the date of this report. CHAPTER 13 2004
11. LOANS: List any loan or combination of loans for more than one thousand dollars (\$1,000) from the same source made in the previous calendar year to you, your spouse or minor children residing with you. Loans need not be disclosed on this report if they are: (1) From your immediate family (spouse, parent, sibling or child);
(2) From a federally insured financial institution or made in accordance with existing law in the ordinary course of doir business of making loans. The loan must bear the usual and customary rate of interest, be made on a basis which assures repayment, evidenced by a written instrument and subject to a due date or amortization schedule;
(3) Secured by a recorded security interest in collateral, bearing the usual and customary interest rate of the lender a made on a basis which assures repayment, evidenced by a written instrument and subject to a due date and amortization schedule;
(4) From a partnership in which you have at least ten percent (10%) partnership interest;
(5) From a corporation in which more than fifty percent (50%) of the outstanding voting shares are owned by you or b
your immediate family (spouse, parent, sibling or child).



SS-8005

12.	NO CHANGES IN ITEMS 5 - 11 (Check if applicable; this box can only be used if you have previously filed directly with the state Ethics Commission):
	There have been no changes in the conditions listed in Items 5 – 11 since my previous report to the Tennessee Ethics Commission.
13.	TO BE SIGNED BY REPORTING OFFICIAL (must be attested to by a witness)
in acco	I certify that the information contained in this disclosure statement is true and that it is a complete and accurate reportance with the Conflict of Interest Disclosure Act.
3	ddie m neal 1-11-07
	Signature of Official or Candidate Date
1,50	SED VEAL, the undersigned, do hereby witness the above signature, which was signed in my presence:
	Signature of Witness Date
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